

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7/1/05

2 Serial/Patent # 10/58149

3 Please refund the following fee(s):

4 PAPER  
NUMBER

5 DATE  
FILED

6 AMOUNT

<input checked="" type="checkbox"/>	Filing		<u>12/1/05</u>	\$ <u>100.00</u>
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

7 TOTAL AMOUNT  
OF REFUND

\$

8 TO BE REFUNDED BY:

☒ Treasury Check

☐ Credit Deposit A/C #:

9

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10 REASON:

- ☒ Overpayment
- ☐ Duplicate Payment
- ☐ No Fee Due (Explanation):

11 REFUND REQUESTED BY: CHARITTA BURT

TYPED/PRINTED NAME:

Charitta Burt

TITLE:

Paralegal

SIGNATURE:

Charitta Burt  
PCT

PHONE:

308-9140x20

OFFICE:

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY: \*\*\*\*\*

APPROVED:

Harry Huetz

DATE:

7/1/05

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

12 Rec'd PCT/PTO 1-7 DEC 2004

PTO-1390 (Rev. 12-2004)

Approved for use through 3/31/2007. OMB 0651-0021  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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U.S. APPLICATION NO. (if known, see 37 CFR 1.5) <div style="font-size: 2em; font-weight: bold; text-align: center;">10/518149</div>		INTERNATIONAL APPLICATION NO. PCT/JP2003/008077		ATTORNEY'S DOCKET NUMBER 0149-045841	
21. The following fees are submitted:					
<input checked="" type="checkbox"/> a) Basic national fee..... \$300.00				\$ 300.00	
<input checked="" type="checkbox"/> b) Examination fee..... \$200.00				\$ 200.00	
<input checked="" type="checkbox"/> c) Search fee..... \$500.00				\$ 500.00	
<b>TOTAL OF ABOVE CALCULATIONS = \$1000.00</b>				\$ 1000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE		
- 100 =	/50 =		x \$250.00	\$	
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$ 130.00	
CLAIMS		NUMBER FILED	NUMBER EXTRA	RATE	\$
Total claims		15 - 20 =	0	x \$50.00	\$
Independent claims		4 - 3 =	1	x \$200.00	\$ 200.00
MULTIPLE DEPENDENT CLAIM(S) (if applicable)				+ \$360.00	\$
<b>TOTAL OF ABOVE CALCULATIONS =</b>				\$ 1330.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.					
<b>SUBTOTAL =</b>				\$ 1330.00	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$	
<b>TOTAL NATIONAL FEE =</b>				\$ 1330.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				\$	
<b>TOTAL FEES ENCLOSED =</b>				\$ 1330.00	
				Amount to be refunded:	\$
				Amount to be charged:	\$
a. <input checked="" type="checkbox"/> A check in the amount of \$ 1330.00 to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit t Account No. 23-0650. A duplicate copy of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.					

Refund P  
07/12/2005

SEND ALL CORRESPONDENCE TO:  
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*Russell D. Orkin*

SIGNATURE  
 Russell D. Orkin  
 NAME  
 25,363  
 REGISTRATION NUMBER

APPROVED

# Check Refund

Refund Status Window Help



## Refunded Payment

Payment from check no: 076431

Bank Routing Code: 043000096

Acct No: XXXXXXXX709

## Check Refund

Number: 145747 Hold Date: 07/12/2005

Amount: 100.00 Treas Check No:

Refund Cat: NONGOVNMNT Status: INPROCESS

Fee Cd: Name/Number: 10518149

### Issue Method

☐ Electronic

☒ Paper

### PCT Code

☐ WIPO

☐ EPO

☒ None

## Mailing Address

Payee Name: WEBB ZIESENHEIM LOGSDON ORKIN & HANSON

Attention: RUSSELL D. ORKIN

Street: 436 SEVENTH AVENUE

700 KOPPERS BUILDING

City: PITTSBURGH

Province:

State: PA Country: US Postal Code: 15219-4094

Tax Identification No:

WCLAYBRO

07/19/2005

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7/19/05